

Caernarvonshire County Council

EDUCATION COMMITTEE

ANNUAL REPORT

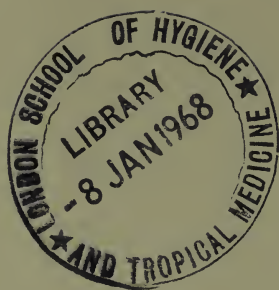
OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR

1952

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CAERNARVONSHIRE COUNTY COUNCIL

To the Chairman and Members of the School Services and Welfare Committee

LADIES AND GENTLEMEN,

The general health of our school children was well maintained during the year. No serious epidemics of infectious disease occurred. Three cases of poliomyelitis (infantile paralysis) were reported. No child suffered from Diphtheria. Details concerning tuberculosis are given on pages 13-14 of the Report. Immunisation with B.C.G. against tuberculosis continued during the year. I am convinced that such protection should be made available to all children irrespective of known contact to a definite case of tuberculosis. It is given as a matter of routine to all children in Denmark and Sweden and has undoubtedly contributed to the remarkable reduction in the incidence of the disease in both countries.

A Speech Therapy service was introduced in March, 1952. This service will be of inestimable value to the children in the county who suffer from speech defects. There are more than two hundred such children in Caernarvonshire and I need not stress the harmful effect of a bad speech defect on a child's mind, personality and future life. Treatment was confined to school children during 1952 in order to ensure that as many as possible of the older children with speech defects received treatment before leaving school. It is hoped to extend treatment to the younger children next year and to develop the service so that children will receive treatment as soon as the need arises. The Committee is indebted to Miss M. W. Ferrie, Chief Speech Therapist of the United Liverpool Hospitals for her ready assistance in treating the more urgent cases during the last two years and in the early part of this year, and for her co-operation in the transfer of information to the Committee's Therapist.

Mr. R. P. Osborne, F.R.C.S., the Consultant in Plastic Surgery has treated many children since the special clinic was established and some remarkable results have been obtained. Such congenital conditions as cleft palate should be treated during the early months of life. If treatment is completed before the child begins to speak, his speech develops normally. This fact serves to emphasise one of our guiding principles—to ascertain and to treat effectively any defect at the earliest possible stage.

It was impossible to complete the medical examination of all school children during the year because the staff was depleted for about six months by the equivalent of one doctor. For similar reasons, the dental service was also severely handicapped.

Comments on the various sections of the service are made in the following pages.

Members of the staff have striven to maintain the services under difficult circumstances and I record my thanks for their successful efforts. The Director of Education and his staff have been most helpful. Teachers have continued to assist the School Health Service in many directions and I am grateful for their interest and co-operation.

It is a pleasure to record the support received from the Chairman and members of the Committee in our efforts to provide the best possible service for our school children.

D. E. PARRY-PRITCHARD,
SCHOOL MEDICAL OFFICER.

SCHOOL HEALTH SERVICES STAFF

School Medical Officer	D. E. PARRY-PRITCHARD, M.D., D.P.H., M.B., CH.B.
Deputy School Medical Officer...	G. WYN ROBERTS, M.B., B.CH. D.P.H.
Senior Assistant School Medical Officer	M. SLATER, M.B., CH.B., C.P.H., D.C.H.
Assistant School Medical Officers	T. EVANS HUGHES, M.R.C.S., L.R.C.P.
	R. OWEN MORRIS, M.D., M.B., CH.B., D.P.H.
	W. N. GAYE, M.R.C.S., L.R.C.P., D.P.H. (Commenced March, 1952. Resigned September, 1952).

Special Services

Orthopaedic	B. L. MCFARLAND, F.R.C.S., M.CH.(Orth.) G. I. ROBERTS, F.R.C.S., M.CH.(Orth.)
Ophthalmic	T. G. WYNNE PARRY, M.R.C.S., L.R.C.P., D.O.M.S. G. C. LASZLO, M.D., L.R.C.P., L.R.F.P.S., D.O.
Ear, Nose and Throat	JOHN ROBERTS, M.D., F.R.C.S.
Paediatric	GWYN GRIFFITH, M.D., F.R.C.P., D.P.H.
Child Guidance	E. SIMMONS, M.D., L.R.C.P., L.R.C.S., L.R.F.P.S.
Plastic Surgery	R. P. OSBORNE, B.Sc., M.B., CH.B., F.R.C.S.

Dental Staff

Senior Dental Officer	Vacant
Assistant Dental Officers—	
(Northern Area)	I. W. JONES, L.D.S.
(Central Area)	D. MCINTYRE, L.D.S.
(Southern Area)	H. PARRY, L.D.S.
Dental Attendants	Three
<i>Psychiatric Officer</i>	Vacant

Nursing Staff

County Superintendent			MISS M. RICHARDS, S.R.N., S.C.M., Q.N.S., M.T.D., H.V.
Superintendent Health Visitor	...	...	MISS W. M. MILLS, S.R.N., S.C.M., H.V.
Health Visitors and School Nurses (Dec., 1952)	...	...	18 full-time and 5 part-time were employed.
Infectious Diseases and Clinic Nurse	...	...	MISS M. WILLIAMS, S.R.N., S.C.M.*
<i>Physiotherapist</i>	...	...	MISS M. F. WILLIAMS, S.S.P.
<i>Speech Therapist</i>	...	...	MRS.N.G.MICHELI (commenced Mar., 1952)
<i>Orthoptist</i>	...	...	MISS J. L. MILLER, D.B.O.
<i>Clinic Officer</i>	...	...	H. P. GRIFFITH
<i>Chief Clerk</i>	...	...	CLEDWYN PARRY

**Also acts as part-time Health Visitor and School Nurse.*

SCHOOL HEALTH SERVICES—CLINICS

TABLE I

Clinic	Place Held	Days Held	Time	Attended by
*Orthopaedic and Ultra Violet Ray	1. War Memorial Centre, Oxford Road, Llandudno	Every Monday	10.00 a.m. to 4.00 p.m.	Physiotherapist
	2. Central Clinic, Shirehall Street, Caernarvon	Every Tuesday	9.00 a.m. to 5.00 p.m.	do.
	3. British Legion Hall, Pwllheli	Every Wednesday	10.00 a.m. to 4.00 p.m.	do.
	4. Snowdon Street Clinic, Portmadoc	Every Thursday	10.00 a.m. to 4.00 p.m.	do.
	5. School Clinic, Sackville Road, Bangor	Every Friday	9.30 a.m. to 4.00 p.m.	do.
	A Survey Clinic is held each month at the Centres (except Portmadoc) in rotation. Attended by Orthopaedic Surgeon.			
Dental	1. War Memorial Centre, Oxford Road, Llandudno	*Every Saturday	10.00 a.m. to 12 noon	School Dentist
	2. School Clinic, Sackville Road, Bangor	Every Saturday	10.00 a.m. to 12 noon	Dental Attendant
	3. Central Clinic, Shirehall Street, Caernarvon	Every Saturday	10.00 a.m. to 12 noon	do.
	*This clinic is held periodically at Dolgarrog			

TABLE 1 (*continued*)

Clinic	Place held	Days held	Time	Attended by
Ear, Nose & Throat	C. & A. Hospital, Bangor Llandudno General Hospital, Llandudno	Every Monday First and Third Tuesdays monthly	2.30 p.m. 2.30 p.m.	E.N.T. Specialist E.N.T. Specialist
Visual Defects	War Memorial Centre, Oxford Road, Llandudno Central Clinic, Shirehall St., Caernarvon School Clinic, Sackville Road, Bangor Cartref Hospital, Pwllheli	Held according to the number of cases requiring treatment		Ophthalmic Specialist Clinic Officer School Nurse
Orthoptic	C. & A. General Hospital, Bangor Snowdon Street Clinic, Port- madoc "Glyn," South Beach, Pwllheli Llandudno General Hospital, Llandudno Central Clinic, Shirehall St., Caernarvon	Mondays Wednesdays First and Third Tuesdays monthly Second and Fourth Tues- days monthly Fridays Mondays Thursdays	2.00 p.m. to 4.00 p.m. 9.30 a.m. to 12 noon, 2.00 p.m. to 4.30 p.m. 10.15 a.m. to 12 noon, 2.00 p.m. to 3.45 p.m. 10.15 a.m. to 12 noon, 2.00 p.m. to 3.45 p.m. 10.00 a.m. to 12 noon, 2.00 p.m. to 5.00 p.m. 9.30 a.m. to 12 noon 9.30 a.m. to 12 noon, 2.00 p.m. to 5.00 p.m.	Orthoptist do. do. do. do.

TABLE I (continued)

Clinic	Place held	Days held	Time	Attended by
Minor Ailments	School Clinic, Sackville Road, Bangor	Daily	9.00 a.m. to 10.00 a.m., 4.00 p.m. to 5.00 p.m.	Health Nurse
	Central Clinic, Shirehall St., Caernarvon	Daily	9.00 a.m. to 10.00 a.m., 4.00 p.m. to 5.00 p.m.	do.
	War Memorial Centre, Oxford Road, Llandudno	Daily	9.00 a.m. to 10.00 a.m., 4.00 p.m. to 5.00 p.m.	do.
	Noddfa, Penmaenawr	Mondays, Wednesdays and Fridays	9.00 a.m. to 10.00 a.m.	do.
	British Legion Hall, Pwllheli	Daily	9.00 a.m. to 10.00 a.m.	do.
	A.T.C. Hut, Meurig Park, Bethesda	Monday mornings	9.00 a.m. to 10.00 a.m.	do.
Child Guidance	Memorial Hall, Penygroes	Daily	9.00 a.m. to 10.00 a.m.	do.
	In addition to these Clinics	Minor Ailments are treated locally by District Nurses.		
Clinics at Llandudno, Caernarvon, Pwllheli and Portmadoc have had to be temporarily discontinued since August, 1948, because of the absence of a Psychiatric Officer.	School Clinic, Sackville Road, Bangor	Every Wednesday	10.00 a.m. to 1.00 p.m.	Psychiatric Social Worker Psychologist Psychiatrist
			2.00 p.m. to 5.00 p.m.	Educational Psychologist

TABLE 1 (*continued*)

GENERAL Clinics	Place held	Days held	Time	Attended by
Bangor Bethesda	School Clinic, Sackville Road A.T.C. Hut, Meurig Park, Bethesda	1st Saturday in the month 4th Friday in the month	9.30 a.m. to 12 noon 2.00 p.m. to 4.00 p.m.	Assistant School Medical Officer and Health Visitor
Caernarvon Conway	General Clinic, Shirehall Street Muriau Buildings	Every Saturday 3rd Friday in the month	9.00 a.m. to 12 noon 2.00 p.m. to 4.00 p.m.	
Llandudno	War Memorial Centre, Oxford Road	2nd Tuesday in the month	1.30 p.m. to 4.00 p.m.	
Llandudno Junc'n	Y.W.C.A. Hall	3rd Friday in the month	10.00 a.m. to 12 noon	
Llanfairfechan	Council Chambers, Town Hall	4th Thursday in the month	11.00 a.m. to 12.30 p.m.	
Penmaenmawr	Jerusalem Vestry	1st Friday in the month	9.30 a.m. to 12 noon	
Penrhyn Bay	Penrhyn Hall, Penrhyn Bay	1st Thursday in the month	9.30 a.m. to 12 noon	
Penygroes	Drill Hall	Last Tuesday in the month	9.30 a.m. to 12 noon	
Portmadoc	Snowdon Street Clinic	2nd Tuesday in the month	9.30 a.m. to 12 noon	
Pwllheli	British Legion Hall	1st Tuesday in the month	9.30 a.m. to 12 noon	

TABLE 1 (*continued*)

Clinic	Place held	Days held	Time	Attended by
Speech	1. British Legion Hall, Pwllheli	Every Monday	10.00 a.m. to 4.00 p.m.	Speech Therapist
	2. School Clinic, Sackville Rd., Bangor	Every Tuesday	10.00 a.m. to 4.00 p.m.	do.
	3. War Memorial Centre, Oxford Road, Llandudno	Every Wednesday	10.00 a.m. to 4.00 p.m.	do.
	4. Central Clinic, Shirehall St., Caernarvon	Every Thursday Every Friday	10.00 a.m. to 4.00 p.m. 10.00 a.m. to 1.00 p.m.	do.

SUMMARY OF SERVICE PROVIDED

TABLE 2

SCHOOL POPULATION

(Number on books at the beginning of the year)	...	18,306
(Number on books at the end of the year)	... ..	18,557

Number of Children medically examined :—

(a) at Periodic Inspections	... ..	3,737
(b) at Special Inspections	... ..	4,488
(c) at Re-Inspections	... ..	2,467

Individual children found at Periodic and Special Inspections to require treatment :—

(excluding uncleanliness and dental diseases)	420
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Individual Children Treated :—

Errors of refraction (including squint)	922
Number of spectacles supplied	... ..	617
Defects of the Nose and Throat	... ..	131
Dental Defects	... ..	3,841
Orthopaedic :—		
(a) in hospitals or hospital schools	... ..	16
(b) in clinics or outpatients departments	... ..	131
Speech Defects	... ..	83
Minor Ailments	... ..	1,302

No. of following-up visits by School Nurses :

(a) to homes	... ..	1,191
(b) to schools	... ..	639

No. of Visits by School Nurses for Cleanliness Inspections :

(a) to homes	524
(b) to schools	541

Other Visits by School Nurses	833
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CONDITION OF SCHOOL BUILDINGS AND PLAYGROUNDS

Reports on defective or unsatisfactory conditions found at 132 schools in 1952 were submitted to the Director of Education. These conditions are enumerated in this table :—

TABLE 3

Nature of Defect	No. found
Insufficient or unsatisfactory water supply	12
Defective and/or insufficient ventilation	9
Defective and/or insufficient heating arrangements	25
Unsuitable and/or insufficient closet accommodation	41
Insufficient and/or unsuitable washing accommodation	13
Insufficient and/or unsuitable cloakroom accommodation	10
Defective Floors	3
Unsuitable playgrounds	42
Absence of or unsuitable dining accommodation	19
Unsuitable or defective blackboards	21
Premises requiring decoration	16
Desks and/or chairs unsuitable... ..	9
Dampness	7
Absence of or unsuitable arrangements for drying clothes	3
Unsuitable and/or insufficient lighting	14

SCHOOL MEDICAL INSPECTIONS

School children have been examined in accordance with the Handicapped Pupils and School Health Service Regulations, 1945. The periods specified in these Regulations are :—

- (a) Children admitted for the first time to a maintained school—as soon as possible after the date of admission.
- (b) Children attending maintained Primary Schools—during their last year of attendance at such schools.
- (c) Children attending maintained Secondary Schools—during their last year of attendance at such schools.
- (d) Children attending maintained schools or County Colleges—from time to time as the Minister may direct.

In addition all children under five years of age attending school are inspected annually ; all children found to be suffering from defects are re-inspected annually ; and special cases are examined at the request of head-teachers and school nurses at schools and clinics.

The Medical Inspection of children was not completed at all schools in the county during 1952, because one of the Assistant Medical Officers, who commenced duties in March, resigned in September owing to ill-health.

CONDITIONS FOUND AT MEDICAL INSPECTIONS

Uncleanliness (Nits and Lice).—School Nurses made 72,463 inspections during the year and found the condition of 679 children (3.7 per cent of the school population) to be unsatisfactory. Only 36 were found to have extensive infestation; 222 were moderately infested and 400 were only very slightly infested. The 21 remaining children were generally unclean in body and clothing. Although the number of children who were found to be extensively infested was comparatively small, I am disappointed to find so many with moderate or slight infestation. Unceasing efforts by the Medical and Nursing staffs during the last few years has produced more co-operation and a better appreciation by mothers of the constant care that is necessary to keep young children free of nits and lice. Much of the infestation found during 1952 could be eradicated with a little more perseverance on the part of the parents of the children concerned. Parents must realise that it is not sufficient to remove most of the nits and/or lice, because a few nits left undisturbed will soon cause further extensive infestation.

Two Cleansing Orders and 281 Cleansing Notices were served during the year.

Defects of the Nose and Throat.—Of 8,225 children examined in the periodic and special groups during the year, 198 (2.4 per cent) were found to require treatment.

Errors of Refraction (Including Squint).—The number of children found to require treatment for visual defects was 245 (or 2.9 per cent) of those examined in the periodic and special groups. An additional 126 children (or 1.5 per cent) required treatment for squint.

Defective Hearing and Ear Diseases.—Seventy-two children (0.87 per cent) were found to require treatment.

Tuberculosis.—All school children who are suspected by the Assistant Medical Officers to be suffering from Tuberculosis and all children who are known to be contacts to cases of Tuberculosis are referred for examination by the Chest Physician at special clinics held at Carenarvon, Bangor, Llandudno and Pwllheli weekly. Before attending each child is visited by the School Nurse who applies a "patch test" three days before the date of the clinic. The result of this test is read by the Chest Physician and each child is clinically and radiologically examined.

During 1952 319 children were referred for examination by the Chest Physician and the results of the examinations are given in Table 5.

Forty-nine school children were notified as suffering from Tuberculosis during 1952, and details are given in this table :—

TABLE 4

Pulmonary		Non-Pulmonary		Total		Grand Total
Males	Females	Males	Females	Males	Females	
20	16	5	8	25	24	49

TABLE 5

No. Referred				Result of Examination												Refused Examination			
				Positive						Negative									
				Pulmonary			Non-Pulmonary			For Observation			Negative						
Age				Age			Age			Age			Age			Age			
—5		5-16		—5		5-16		—5		5-16		—5		5-16		—5		5-16	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
52	54	98	115	1	2	—	—	—	—	—	—	2	4	41	42	75	92	10	21

TABLE 6
B.C.G. VACCINATION

Year	Preliminary Skin Tests		Children vaccinated with B.C.G.							Reaction after Vaccination	
			Age Period								
	Positive Reaction	Negative Reaction	—1	1-5	5-10	10-15	15-20	Total	Positive	Negative	
1950	...	10	36	13	10	6	7	—	36	36	—
1951	...	41	116	18	35	35	26	2	116	114*	1†
1952	...	22	147	26	61	34	22	4	147	139†	—
Totals	...	73	299	57	106	75	55	6	299	289	1

† Child had negative reaction after first Post Vaccination Test and was given a second application but the parents refused further examination.

* One child left the county before an examination could be made to ascertain the reaction.

‡ Eight children failed to attend for post-vaccination examination.

Nutrition.—This Table shows the classification of the general condition of the pupils examined in the periodic age groups during 1952 :—

TABLE 7

Age Group	No. of Pupils Examined	A (Good)		B (Fair)		C (Poor)	
		No.	%	No.	%	No.	%
Entrants	1,588	152	9.6	1,387	87.3	49	3.1
Second Age Group ...	1,167	134	11.5	1,003	85.9	30	2.6
Third Age Group ...	982	143	14.6	809	82.3	30	3.1
Totals	3,737	429	11.48	3,199	85.6	109	2.91

Handicapped Pupils.—The Local Education Authority is required by Section 34 of the Education Act 1944, to ascertain which children in its area require special educational treatment and to provide such treatment to the children concerned.

The categories of children who are deemed to require special educational treatment are defined in the Handicapped Pupils and School Health Service Regulations 1945. These categories are :—

Blind, Partially-sighted, Deaf, Partially Deaf, Delicate, Diabetic, Educationally Sub-normal, Epileptic, Maladjusted and Physically Handicapped Pupils, and pupils suffering from Speech Defects.

The special methods of education for children in each of these categories are also defined in the same Regulations, and vary from special educational treatment in an ordinary school to special education at a boarding school specially maintained for educating and training pupils suffering from one of the handicaps mentioned.

Table 8 gives details of the children in this county who have been categorised in accordance with the definitions contained in the Handicapped Pupils, and School Health Service Regulations 1945. It must be appreciated, however, that the figures given in the Table do not necessarily give a true indication of the number of children in the county who are handicapped in some way or other. For example pupils classified as Physically Handicapped Pupils under the Regulations must be so handicapped that they cannot be satisfactorily educated in an ordinary school or cannot be educated in such a school without detriment to their health or educational development ; whereas children who might be handicapped by the loss of one or two limbs, but who can be educated at an ordinary school, do not come within the meaning of the definition prescribed for Physically Handicapped Pupils, and are therefore excluded from the totals given in Table 8. Similarly Diabetic Children can only be classified as Diabetic if they cannot obtain the treatment they need while living at home. Because of the long time necessary to ascertain an Educationally Sub-normal child it has not been yet possible to ascertain all those requiring special attention in the county.

One of the biggest problems concerning these children is to provide them with the special educational treatment which they require, because

of the acute shortage of special schools in the country and the long waiting lists for admission to existing schools.

In order to overcome this difficulty the Education Committee opened the new school for Educationally Sub-normal Children at Treborth Hall in 1950. The school has accommodation for 60 children and children from Anglesey and Merionethshire are admitted in addition to Caernarvonshire Pupils. As this school is confined to Welsh-speaking children, the problem of obtaining accommodation for English-speaking children remains. The Welsh Joint Education Committee, on behalf of Welsh Counties, opened a school for Deaf and Partially Deaf Pupils at Llandrindod Wells in 1950. The Education Committee of this Council agreed that there was need for a Residential Special School for Physically Handicapped Pupils in the five North Wales Counties, and I hope that such a school will be established as soon as suitable premises are obtained.

There is no doubt that special educational treatment of this sort has been, and will be, of inestimable benefit to the little children who have received it. They are given facilities and training to overcome their handicap during their early life when they are best able to assimilate it. These extracts from reports which have been received on the progress made by the children after admission to Special Schools are most encouraging :—

J.J. *Blind. Age 11.*

Braille : Satisfactory progress. Can now read and write full Grade II moderately well.

Numbers : Has completed addition and subtraction of money.

English : Expresses ideas quite clearly and work displays imagination.

General : A well-built girl—very energetic in Physical Training—has a good sense of rhythm—fearless with gymnasium apparatus.

Can be pleasant and friendly and is always anxious to help.

S.E. *Blind. Age 7.*

Braille : Reading Oxford Reader with good comprehension. Knows and uses the first four lines of Braille.

Numbers : Number sense good. Knows the use of money up to 2s. Able to make use of weighing scales.

English : Has good speech and preparing to take part in a play.

General : Has very good carriage and excellent sense of direction. Does well with gymnasium apparatus. A very pleasant and popular little girl and displays good promise.

E.J.R. *Deaf. Age 6.*

Uses imagination at play—improved control and shows initiative. Eager, active and quick in movement—co-operates well and is enthusiastic. Gaining in independence. Improved attitude to “work”—has made progress in all subjects. Can be relied upon to show an “audience” what he can do.

Handicapped Pupils who cannot be admitted to approved special schools are given Home Tuition until vacancies can be obtained for them. Home Tuition was given to fourteen children during 1952.

TABLE 8

Category	Atten- ding Special Schools	Atten- ding Ordinary Schools	Recei- ving Home Tuition	At Home	Totals	Requiring Places at Special Schools but remaining unplaced
Blind	3	—	1	—	4	—
Partially Sighted	2	9	—	1	12	2
Deaf	5	1	—	1	7	2
Partially Deaf... ..	1	28	—	1	30	4
Delicate	—	24	—	—	24	12
Physically Handicapped	1	30	6	7	44	43
Educationally Sub- normal*	31	236	—	—	267	128
Maladjusted	2	7	—	—	9	1
Epileptic	1	—	—	1	2	1
Speech Defect	—	12	—	—	12	—
Totals... ..	46	347	7	11	411	193

* Ascertainment not completed.

Dental Services.—Dental inspection and treatment of School Children was performed by two Assistant Dental Officers from January to May, 1952. A third Assistant was appointed in May and was responsible for the dental services in the Central Area of the county. Although the appointment of an additional Assistant Dental Officer materially reduced the strain on the dental services, this was partly counterbalanced through the unfortunate illness of one of the other officers who was off duty for almost three months.

The number of children treated during 1952 was 3,841 as compared with 2,709 during the previous year, and there was a considerable increase in the amount of orthodontic work performed.

Details of the work performed during the year are given in Tables 9 and 10.

TABLE 9
INSPECTIONS AND TREATMENT

Description of Work						Number
No. of Children examined :						
Periodic Inspections						15,024
Specials and Clinics						128
Total						15,152
Number of children found to require treatment						7,722
Number referred for treatment						7,267
Number actually treated						3,841
Number of attendances made for treatment						3,851
Fillings :						
Permanent Teeth						2,313
Temporary Teeth						661
Total						2,974
Extractions :						
Permanent Teeth						191
Temporary Teeth						3,134
Total						3,325
Half days devoted to :						
Inspections						217
Treatment						614
Total						831
General anaesthetics administered						5
Number of other operations:						
Permanent Teeth						1,162
Temporary Teeth						1,069
Total						2,231

TABLE 10
ROUTINE INSPECTIONS

Age	No. of children found to require treatment	No. of children not requiring treatment	Total
2	1	—	1
3	17	294	311
4	294	929	1,223
5	861	1,209	2,070
6	937	873	1,810
7	957	740	1,697
8	1,012	769	1,781
9	1,061	755	1,816
10	878	770	1,648
11	671	740	1,411
12	406	455	861
13	333	386	719
14	331	357	688
15	155	173	328
16	60	39	99
17	43	21	64
18	17	15	32
Totals	8,034	8,525	16,559

MEDICAL AND SURGICAL TREATMENT

Minor Ailments.—Health Visitors and District Nurses treated 1,302 Minor Ailments during 1952. These comprised 196 skin complaints, 53 eye defects, 108 defects of the ear and 945 miscellaneous defects. The number of attendances made for treatment was 2,788.

Visual Defects.—The Ophthalmic Specialists examined 809 children during 1952. Spectacles were prescribed for 673 children and another fifteen received other forms of treatment. The Orthoptist treated 98 new cases. Health Visitors and District Nurses treated 53 children for minor eye defects at the clinics.

Ear, Nose and Throat.—Of 183 children examined by the Specialist Officer during 1952, 128 were advised to have operative treatment for tonsils and/or adenoids, 10 were advised to have other operations and 25 were referred for other forms of treatment for nose and throat conditions. The remaining 20 children were referred for treatment for ear defects.

Details of children who received treatment during the year are given in Table 11.

TABLE 11

Nature of Treatment							Number
Operative treatment for adenoids and Chronic Tonsillitis	...	...	...	...	...	...	84
Operative treatment for other Nose and Throat conditions	...	...	...	...	...	...	1
Other forms of treatment for Nose and Throat conditions	...	...	...	...	...	...	27
Treatment for ear defects	...	...	...	...	...	...	20
Total	...	...	...	...	...	...	132

Speech Therapy.—I am glad to report that I was able to obtain the services of a Speech Therapist during 1952. I have received these observations from Mrs. Micheli on the work she performed during the year, and details of treatments and attendances are given in Table 12 :—

“ Dear Sir,

During 1952 regular speech clinics were established at four centres in the county—Pwllheli, Carnarvon, Bangor and Llandudno—these were, on the whole, very well attended and the proportion of children discharged from each of these centres by the end of the year was very satisfactory.

It was considered holding a fifth clinic in Portmadoc and a preliminary survey of the cases from that area was made. However it was evident that the majority of these people were travelling long distances from outlying districts; and it was decided either to visit them personally or to absorb them into the Pwllheli and Carnarvon clinics.

Attendances of children living in country areas tended to become erratic during the winter months due to weather conditions, and this, coupled with the fact that none of the centres were fully established until the end of May, has kept the final figures a little lower than might otherwise have been expected.

Priority, where possible, has been given to the older children, in order that they should benefit before leaving school, or becoming involved with work for the School Certificate. However, the urgent cases have always been accepted for treatment first, and this has been irrespective of the child's age.

Progress of the younger children particularly has been somewhat hampered by language difficulties, although co-operation from parents—and other children!—has been excellent, and while undeniably tending to keep progress slow, this difficulty has been by no means insuperable.

Latterly, patients living in outlying areas have been visited personally on Saturday mornings, thus ensuring regular treatment for those children who would normally be unable to attend clinics; though of necessity such visits are less frequent than could be wished. Parents, however, are most co-operative and helpful.

Two or three children from Anglesey attended the Bangor clinic, and although these children were exclusively Welsh speaking, all have now been discharged with—as far as I can discover—normal speech.

I have been interested to note the quite remarkable increase in lisps and defective R sounds, as I progressed towards the Llandudno end of the county. This was most marked and was especially noticeable among the Grammar School children and those coming from the better class homes. Many parents considered it an added attraction, and I feel this attitude was probably largely responsible for the defects.

It is a known fact that cases of stammering involve a much greater length of treatment than many other conditions, and such children are often regular visitors to a speech clinic for a year or more, and longer in severe cases, and it will be noted from the chart that comparatively few of these children have been discharged. However, nearly all cases under treatment show a marked improvement and many will be ready for discharge shortly.

Yours faithfully,
N. G. MICHELI.

TABLE 12

Clinic	Defect	Number of individual children treated	Total attendances	Discharged Speech Normal	Still under treatment	Left School	Ceased to attend before treatment completed
BANGOR	1. Dyslalia	6	53	5	1	—	—
	2. Stammer	13	188	4	8	1	—
	3. Cleft Palate	2	15	1	1	—	—
	4. Sigmatism	—	—	—	—	—	—
	5. Dysphonia	—	—	—	—	—	—
	Total	21	256	10	10	1	—
CAERNARVON	1. Dyslalia	9	76	6	3	—	—
	2. Stammer	21	226	3	17	1	—
	3. Cleft Palate	—	—	—	—	—	—
	4. Sigmatism	—	—	—	—	—	—
	5. Dysphonia	—	—	—	—	—	—
	Total	30	302	9	20	1	—
LLANDUDNO	1. Dyslalia	6	78	4	2	—	—
	2. Stammer	7	107	2	5	—	—
	3. Cleft Palate	1	11	—	1	—	—
	4. Sigmatism	2	10	1	—	—	1*
	5. Dysphonia	—	—	—	—	—	—
	Total	16	206	7	8	—	1
PWLLHELI	1. Dyslalia	4	31	1	3	—	—
	2. Stammer	9	103	—	9	—	—
	3. Cleft Palate	1	12	—	1	—	—
	4. Sigmatism	—	—	—	—	—	—
	5. Dysphonia	2	15	2	—	—	—
	Total	16	161	3	13	—	—
Grand Total		83	925	29	51	2	1

*NOTE.—Attended only once. Discharged at parents request as child leaving school soon.

Child Guidance.—This service was continued on a much depleted scale again in 1952, because of the impossibility of obtaining a Psychiatric Social Worker, and the clinics at Caernarvon, Llandudno, Pwllheli and Portmadoc remained closed. The work at the Bangor Clinic, however, was continued under the able direction of Dr. E. Simmons, Consultant Child Psychiatrist of the Regional Hospital Board. Details of the cases seen at the Clinic are given in Table 13 :—

TABLE 13

ANALYSIS OF CASES EXAMINED AT CHILD GUIDANCE CLINIC

Cause of Referral				Improved		Diagnostic		Under Treatment		Awaiting Appointment		Total Referred	
				M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Educational Problem ...	...	...	...	—	—	1	1	1	—	—	2	2	3
Enuresis ...	...	...	...	1	—	—	1	2	—	1	—	4	1
Stealing ...	...	...	...	—	1	—	1	—	—	—	—	—	2
Behaviour Problem ...	...	...	...	—	1	4	2	—	1	2	1	6	5
Maladjusted ...	...	...	...	—	—	—	—	1	—	—	—	1	—
Totals ...	...	...	...	1	2	5	5	4	1	3	3	13	11

Orthoptic Treatment.—I have received this report of the work performed by the Orthoptist during 1952 :—

TABLE 14

Number of Old Cases attending the Clinics at the beginning of the year	346
Number of New Patients referred for treatment during the year	98
Total Children Treated	444
Total number of attendances for treatment	3,031
Occlusions	1,948
Treatments... ..	1,083
Number of cases apparently cured by treatment only	59
Number of cases apparently cured by treatment and operation	4
Number of unco-operative cases	3
Number of patients failing to report	42
Number of patients who left school	8
Number of patients who left district	4
Number of patients receiving treatment at the end of the year...	324
Number of operations performed	7
Number of cases referred for cosmetic operations	3
Number of amblyopic cases cured (no squint)	3
Number of patients awaiting operation	8

ORTHOPTIC CLINICS

Clinic	No. of occlusions	No. of Treatments	Number Cured	Awaiting Treatment	Failing to Report
Llandudno	503	310	20	—	11
Bangor	447	307	21	—	16
Carnarvon	533	335	17	—	10
Pwllheli	272	74	8	—	3
Portmadoc	193	57	3	—	2
Totals	1948	1083	69	—	42

Orthopaedic Treatment.—Orthopaedic Survey Clinics were held at Carnarvon, Bangor, Pwllheli and Llandudno during the year and 627 children were examined by the specialists at these centres. The Council's Physiotherapist gave treatment to 131 children in the After-Care Clinics held in the same centres.

A summary of the work done at these clinics during 1952 is given in these tables :—

TABLE 15
SURVEY CLINICS

Place Held	No. of Sessions	Number Examined		Treatment Recommended					No. Dischar'd
		New Cases	Old Cases	Hosp-ital	Appli-ances	Mass-age and S.R.E.	Ob-serv-ation	Other Treat-ment	
Caernarvon ...	3	48	142	4	44	23	91	—	44
Bangor ...	3	45	91	3	35	9	42	1	17
Pwllheli ...	4	47	112	6	45	17	64	—	22
Llandudno ...	3	57	85	—	39	8	47	—	20
Totals ...	13	197	430	13	163	57	244	1	103

TABLE 16
HOSPITAL TREATMENT

No. of children on waiting list at the beginning of the year ...	...	5
No. of children advised hospital treatment during the year ...	...	16
No. of children admitted to hospital during the year ...	...	16
No. of children discharged from hospital during the year ...	...	13
No. of children whose parents refused hospital treatment ...	...	3
No. of children on waiting list at the end of the year ...	...	2

TABLE 17
AFTER-CARE CLINICS

Place Held	No. of Sessions	Individual Cases who attended	Total Attendances
Llandudno ...	44	24	290
Bangor ...	41	26	324
Caernarvon ...	79	36	332
Portmadoc ...	46	22	262
Pwllheli ...	48	23	299
Totals ...	258	131	1,507

TABLE 18

ULTRA VIOLET RAY CLINICS

Place Held	No. of Sessions Held	Individual cases who Attended	Total Attendances
Llandudno ...	41	46	531
Bangor ...	34	39	395
Carnarvon ...	77	113	1,382
Pwllheli ...	44	21	281
Portmadoc ...	31	7	76
Totals ...	227	226	2,665

INCIDENCE OF INFECTIOUS DISEASES AMONGST CHILDREN BELOW SCHOOL LEAVING AGE

There was no serious outbreak of Infectious Diseases in 1952, among children below school leaving age. The number of cases of Whooping Cough notified during the year was 155 as compared with 420 during 1951, and the number of cases of measles notified was 179 as compared with 2,074 in 1951. It cannot be assumed, however, that these figures represent the accurate incidence of both diseases in the county.

Five cases of Poliomyelitis were notified, two of which were cases from other counties diagnosed at the County Hospital, Bangor. The three Carnarvonshire children had some residual weakness of the arms and legs and were still receiving treatment at the end of the year.

Details of the notifications received are given in Table 19 :—

TABLE 19

Disease	Number Notified
Scarlet Fever	79
Whooping Cough	155
Acute Poliomyelitis	5
Measles	179
Acute Pneumonia	8
Polio-encephalitis	1
Meningococcal Infections	3
Dysentery and Food Poisoning	15
Chickenpox	49

Diphtheria Immunisation.—The number of children who completed the full course of immunisation during 1952 was 1,218, of which 913 were performed by the Assistant School Medical Officers and 305 by general practitioners. A total of 1,618 boosting doses were also given during the year—1,580 of them by Assistant School Medical Officers and 38 by General Practitioners.

Table 21 gives the incidence and mortality rates of Diphtheria since 1913, and emphasises the effectiveness of immunisation in conquering the disease since the service was introduced in the county in 1939. This almost complete eradication of the disease can only be maintained, however, with the continued co-operation of parents in securing the immunisation of their children. It is most disappointing to find that now only 63.3 per cent of children under five years of age and 68.39 per cent of the total child population in this county are protected against Diphtheria, and parents whose children have not been protected should realise that this negligence is depriving their children of protection against a very dangerous disease. The Medical, Health Visiting and Nursing Staffs will continue to impress upon all parents the importance of ensuring that their children are given the free protection against Diphtheria to which they are entitled. Seeking and obtaining protection involves little or no trouble to a parent and very little discomfort to the child—failure to obtain protection may cause considerable suffering or loss of life to the child.

Details of the children immunised are given in Table 20 :—

TABLE 20

	0-4 years	5-14 years	Total
Child Population	8,700	16,900	25,600
Children Immunised	5,508	12,001	17,509
Percentage	63.31	71.01	68.39

ANALYSIS OF THE ABOVE TABLE

Year of Birth	1938-1942	1943-1947	1948	1949	1950	1951	1952	Total
No. of Children immunised ...	5,691	6,310	1,572	1,356	1,215	1,042	323	17,509

DIPHTHERIA — INCIDENCE AND MORTALITY (ADULTS AND CHILDREN)

RATES PER 100,000 POPULATION

TABLE 21

Year	INCIDENCE		MORTALITY	
	Cases Notified	Attack Rate	Deaths	Death Rate
1913	175	140	19	15
1914	227	182	16	13
1915	171	147	13	11
1916	164	146	30	27
1917	76	73	12	11
1918	55	53	6	6
1919	82	73	7	6
1920	124	107	11	9
1921	287	235	23	19
1922	223	183	16	13
1923	102	85	2	2
1924	58	48	1	1
1925	67	56	4	3
1926	41	34	1	1
1927	57	47	4	3
1928	81	65	12	9
1929	142	115	9	7
1930	96	79	5	4
1931	93	78	7	5
1932	133	111	6	5
1933	110	92	4	3
1934	61	51	3	2
1935	97	81	3	2
1936	124	103	6	5
1937	330	277	9	7
1938	260	211	6	5
1939	202	169	8	7
1940	175	137	10	8
1941	204	143	10	6
1942	242	176	8	7
1943	159	120	3	2
1944	85	67	3	2
1945	91	74	3	3
1946	19	15	1	1
1947	19	15	—	—
1948	18	14	—	—
1949	2	1.6	—	—
1950	1	0.8	1 (adult)	0.8
1951	2	1.6	—	—
1952	—	—	—	—

MILK IN SCHOOLS SCHEME

Continuous efforts were made during the year to ensure that all milk supplied to schools under this scheme was either Tuberculin Tested or Pasteurised, where such supplies were available. The County Health Officer supervised the standard of cleanliness and biological examination of the milk and I have received this report from him on the administration of the Scheme during 1952 :—

“ To the School Medical Officer,

Dear Sir,

I append my observations on my supervision of the Milk in Schools Scheme during 1952.

Under the scheme everything possible was done to secure for the children Special Designated Milk, supplied in 1/3 pint bottles with straws. When milk is provided in capped bottles the risk of contamination after delivery to the schools is eliminated, for it remains only for the child to pierce the metal foil cap, and insert the straw when the milk can be consumed without exposure. The type of milk is dependent in many instances upon the supplies available locally, and the restrictions governing the approval of designated milk supplied in capped bottles had occasionally to be lifted. In these instances where designated milks were not available the greatest precautions were taken including the pasteurising of the milk at the schools before it was given to the children.

As milk is a ready vehicle of infections, it is of vital importance that the safety of the milk is ensured, and where possible preference is given to pasteurised milk, as there is no guarantee that even Tuberculin Tested milk is free from Tubercle germs. Tuberculin Tested and other raw milks can also be infected with *Brucella Abortus* and other pathogenic organisms—I have endeavoured therefore to establish a supply of pasteurised milk to as many schools as possible in the county and interviewed potential suppliers on many occasions. I also conferred with the County School Meals Organiser concerning ways and means of procuring these supplies, and I was later asked to attend a School Meals Sub-committee, where I was requested to express my views.

During the year the number of sources of supply were reduced from 32 to 29 and for the first time since the Scheme began all schools were receiving liquid milk. The following particulars indicate the types of milk supplied to the schools in the County.

Grade of Milk	Number of Schools	
	1951	1952
T.T. Pasteurised	18	18
Pasteurised	123	127
Tuberculin Tested	14	11
Ungraded	12	12
Dried Milk	1	—

The milk supplied by each individual supplier was sampled and examined bacteriologically at least once every six weeks at the Public Health Laboratory, Conway, and the standard of cleanliness can be observed from this table :—

Grade of Milk	No. of samples taken	No. Satisfactory	No. Unsatisfactory
Pasteurised	62	60	2
T.T. Pasteurised	13	13	—
Tuberculin Tested	70	62	8
Ungraded	55	44	11

Of the pasteurised samples submitted for examination two failed to satisfy the phosphatase test, indicating either that raw milk had been added to the milk after it had been pasteurised or that the milk had been underheated. I was not able to ascertain the cause, but milk from both these suppliers was satisfactory on subsequent occasions. The 19 samples of raw milk which did not satisfy the keeping quality test, were taken for examination during the warmer period of the year, and careless methods of production and storage were no doubt responsible for these failures. Advice was given to the producers, and the Ministry of Agriculture and Fisheries, which is the licensing Authority, were informed on each occasion.

Upon receipt of a complaint from a head-teacher one bottle containing pasteurised milk supplied to the school was found to be unclean. The supplier was convicted and fined.

With the exception of the few instances previously mentioned, the milk supplied to the school children has been of reasonably good standard.

Yours faithfully,

G. RICHARDS,

County Health Officer."

School Meals.—Approximately 16,790 children partook of this service during 1952. Meals were provided in 159 schools or departments and were served from 132 kitchens.

Despite the fact that the staff in several of the kitchens had to work under difficult conditions due to the shortage of suitable accommodation, the quality of the meals provided remained satisfactory and the service has proved of inestimable benefit to children whose parents could ill-afford to provide substantial meals for them at home daily.

There has been excellent co-operation between the School Meals Organiser and the County Health Officer in maintaining a high standard of cleanliness and safety in the various kitchens in the county. The County Health Officer visited several of these kitchens and his advice on the safe handling and storage of food was welcomed by the School Meals Organiser and by members of the Canteen Staffs.

Seven Canteens have already been admitted as members of the Clean Food Association and structural alterations to kitchens and the provision of new equipment during 1952 will enable more to qualify for membership this year.

Open Air Education.—There are no residential Open Air Schools in the County and children requiring open air education are admitted to Penhesgyn and to special residential schools elsewhere.

MINISTRY OF EDUCATION

MEDICAL INSPECTION RETURNS

FOR THE YEAR ENDED 31ST DECEMBER, 1952

Medical Inspection of Pupils Attending Maintained Primary and Secondary Schools (including Special Schools)

A. PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups :—						
Entrants ... ..	...	...	...	...	...	1,588
Second Age Group ... ..	...	...	...	...	...	1,167
Third Age Group ... ..	...	...	...	...	...	982
Total ... ..	...	...	...	...	...	<u>3,737</u>
Number of Other Periodic Inspections						
Grand Total ... ..	...	...	...	...	...	<u>3,737</u>

B. OTHER INSPECTIONS

Number of Special Inspections ... ..	...	...	...	...	...	4,488
Number of Re-Inspections ... ..	...	...	...	...	...	<u>2,467</u>
Total ... ..	...	...	...	...	...	<u>6,955</u>

C. PUPILS FOUND TO REQUIRE TREATMENT

Group	For Defective Vision (excluding squint)	For any of the other conditions recorded in Table*	Total Individual Pupils
Entrants	12	176	185
Second Age Group	51	78	126
Third Age Group	54	57	109
Total (prescribed groups)	117	311	420
Other Periodic Inspections	—	—	—
Grand Total	117	311	420

**Return of Defects found by Medical Inspection in the Year Ended 31st
December, 1952**

TABLE 1*

De- fect Code No.	Defect or Disease	Periodic Inspections		Special Inspections	
		No. of Defects		No. of Defects	
		Requiring treat- ment	Requiring to be kept under observa- but not requiring treat- ment	Requiring treat- ment	Requiring to be kept under observa- but not requiring treat- ment
4	Skin	27	87	30	47
5	Eyes : (a) Vision ...	117	113	95	68
	(b) Squint ...	61	67	65	64
	(c) Other... ...	13	56	20	46
6	Ears : (a) Hearing ...	11	48	25	50
	(b) Otitis Media... ..	13	55	6	41
	(c) Other... ..	7	18	10	21
7	Nose or Throat	56	750	142	771
8	Speech	12	49	23	38
9	Cervical Glands	5	221	6	224
10	Heart and Circulation	12	153	21	122
11	Lungs	6	188	9	210
12	Developmental :				
	(a) Hernia	1	23	5	21
	(b) Other... ..	4	23	5	27
13	Orthopaedic :				
	(a) Posture	8	19	3	7
	(b) Flat foot	32	92	41	62
	(c) Other	52	107	74	96
14	Nervous system :				
	(a) Epilepsy	1	10	—	1
	(b) Other... ..	7	23	5	26
15	Psychological :				
	(a) Development	3	18	4	32
	(b) Stability	2	26	2	25
16	Other	22	84	58	87

TREATMENT TABLES

GROUP 1—DISEASES OF THE SKIN

	Number of cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm : (i) Scalp	—	—
(ii) Body	8	—
Scabies	1	—
Impetigo	98	—
Other skin diseases	89	9
Total	196	9

GROUP 2—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	—	15
Errors of refraction (including squint)	—	907
Total	—	922
Number of pupils for whom spectacles were		
(a) prescribed	—	673
(b) obtained	—	617

GROUP 3—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment :		
(a) for diseases of the ear	—	—
(b) for adenoids and chronic tonsillitis	—	84
(c) for other nose and throat conditions	—	—
Received other forms of treatment	—	47
Total	—	131

GROUP 4—ORTHOPAEDIC AND POSTURAL DEFECTS

	By the Authority	Otherwise
(a) Number treated as in-patients in hospitals	16	—
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments	—	131

GROUP 5—CHILD GUIDANCE TREATMENT

	Number of Cases Treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance Clinic	—	34

GROUP 6—SPEECH THERAPY

	Number of Cases Treated	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapists	83	—

GROUP 7—OTHER TREATMENT GIVEN

	Number of Cases Treated	
	By the Authority	Otherwise
(a) Miscellaneous minor ailments	945	—
(b) Other (specify)		
1. Eye Diseases	53	—
2. Ear Diseases	108	—
3. Ultra Violet Light Treatment...	226	—
Total	1,332	—

DENTAL INSPECTION AND TREATMENT

(1) Number of pupils inspected by the Authority's Dental Officers :—					
(a) Periodic age groups	...	...	...	...	15,024
(b) Specials	...	...	...	...	128
Total (1)					15,152
(2) Number found to require treatment	...	...	...	...	7,722
(3) Number referred for treatment	...	...	...	...	7,267
(4) Number actually treated	...	...	...	...	3,841
(5) Attendances made by pupils for treatment	...	...	...	...	3,851
(6) Half-days devoted to :	Inspection	...	...	...	217
	Treatment	...	...	...	614
Total (6)					831
(7) Fillings :	Permanent Teeth	...	...	...	2,313
	Temporary Teeth	...	...	...	661
Total (7)					2,974
(8) Number of teeth filled :					
	Permanent Teeth	...	...	...	2,313
	Temporary Teeth	...	...	...	661
Total (8)					2,974
(9) Extractions :					
	Permanent Teeth	...	...	...	191
	Temporary Teeth	...	...	...	3,134
Total (9)					3,325
(10) Administration of general anaesthetics for extraction					5
(11) Other operations :					
	Permanent Teeth	...	...	...	1,162
	Temporary Teeth	...	...	...	1,069
Total (11)					2,231

INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurses or other authorised persons	...	...	...	...	72,463
(ii) Total number of individual pupils found to be infested	...	...	...	...	679
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act 1944)	...	...	...	...	281
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3) Education Act 1944)	2

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